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ABSTRACT

A model for evaluating effectiveness in preschool and school social work programs is proposed. The paradigm has two major dimensions: criteria for evaluating success, and modalities for assessing whether the criteria have been met. Three criteria are suggested including improved views of significant others, and seven modalities including test scores, observational data, and self-reports. The conditions under which each criterion and modality is optimal are discussed and examples offered of instruments which can be used for each modality. The difference between effort and effectiveness evaluation is highlighted along with the procedures which can be followed in conducting each type of evaluation. Among the other issues explored are the use of the interrupted time series design, unanticipated consequences, the need for both short-term and long-term objectives, and the advantages of contrast groups over control groups. Suggestions are offered to individual social workers for modifying this model to assess the effectiveness of their own practice. Appendices include criteria for judging program effectiveness, tests of parent attitudes, the manual for the Toy Sorting Task, a bibliography of self concept tests, and tests involving locus of control, interpersonal perception, and teacher behavior. (Author/RD)

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THE UNIVERSITY OF MICHIGAN
School of Social Work

Assessment of Effectiveness in Preprimary and School Social Work Programs

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One of the most difficult tasks for school social workers is assessing the effectiveness of their work. By effectiveness is meant the extent to which the stated goals of a program have been realized (Epstein and Tripodi, 1977). Effectiveness must be differentiated from effort which refers to the amount and kinds of activities engaged in (Tripodi, Fellin, and Epstein, 1971). Those of us who were employed as school social workers in Michigan in the 1950's and early 1960's remember the lengthy periodic reports that we completed for the State indicating what percentage of our time was spent in work with children, with teachers, with parents, etc. It was well-known that completing these reports was not our favorite activity; what was not always recognized, however, was that those reports had nothing to do with assessing our achievements. They only assessed our efforts, regardless of outcomes. The instrument was an attempt to monitor the program or determine the extent to which its operations were carried out. Nothing referred to how well we were succeeding in whatever activities consumed our time.

The topic of this paper, assessment of effectiveness, is a neglected, thorny component of school social work practice. I chose this issue partially because the current emphasis of virtually all State and Federal education programs is on accountability. The message is clear that professionals working in schools cannot go on much longer doing what they think is best without having to prove to someone that their efforts are fruitful. Secondly, with the growing competition for tight dollars in special education, most school social workers are aware that they can be replaced by someone in another field, someone who may be less costly. Thus, for their own protection, perceptive school social workers are looking for strategies which show that they cannot readily be dispensed with. Finally, for their own morale and mental health, conscientious school social workers need and want clearcut evidence that their efforts are not exercises in wheel spinning. For all

three reasons, the time has come I feel to face the problem head-on. This paper will attempt to delineate some clear paths to the determination of school social work effectiveness and make it evident that the trip may not be an easy one but it can be undertaken, and may even be gratifying. The focus on the discussion will be on preprimary programs for handicapped children, but the basic principles will apply to other school social work programs as well. Some implications for individual school social work practice will be discussed at the conclusion.

Preprimary programs for any high-risk or handicapped group of youngsters can be analyzed on at least three dimensions relevant to assessment: 1) The major target of the intervention; 2) The size of the target or client system; and 3) The orientation of the intervention program. Regarding the first, the target has traditionally been the mother, the child, or both. There are other possibilities, however, which should be considered more frequently than they are, especially fathers, siblings, and major caregivers such as daycare mothers. Insofar as size of the target system is concerned, the alternatives typically chosen are an individual mother, an individual child, a small group of mothers, or a classroom of children. The orientations of preprimary programs tend to be distinguishable primarily in terms of degree of structure in the curriculum. At one extreme are the highly prescribed behavioral programs, such as those developed at the University of Kansas by Bushell (Bissell, 1971) or the structured program of Englemann and Becker (Bissell, 1971). At the other extreme are the open, child-centered models which tend to be based on Piagetian theory such as the program developed by the Educational Center of Newton, Massachusetts (Bissell, 1971). Most preschool programs fall somewhere in the middle, or try to combine both elements (Radin and Wittes, 1974). Another way of thinking of this parameter is to conceptualize the structured models as having very specific, clearcut,objectives for all children. The more Piagetian models tend to emphasize think-

ing processes and the child's exploration of the environment, thus their goal tend to be ambiguous and difficult to translate into operational terms. Similarly, therapeutic programs with a psychoanalytic orientation tend to have goals which are non-specific and difficult to operationalize. In both cases the goals encompass a myriad of possible child behaviors which the program implementers seldom try to predict.

With this background, we can move to the heart of the issue, assessing effectiveness. As the definition indicated, no assessment is possible unless there are articulated goals. Goals are descriptions of the desired outcomes of purposeful actions. Goals may be stated in relatively abstract terms such as the enhancement of the child's ability to communicate, but they must be realistic and attainable (Vinter, 1974). Objectives derive from the goals and specify the change that is expected; they must be stated in measurable, concrete terms. A simple way to transform goals into objectives is to identify who will be expected to do what, under what conditions, and if appropriate, how frequently. Thus if the goal is to enhance the child's self-esteem, the objective might be for the child to obtain a specific score on a **measure** of self-esteem such as the Scamin Self-Concept and Motivation Inventory (Farrah, Milchus, and Reitz, 1968).

When delineating objectives, it is often desirable to assess if progress is being made toward the long-term goal. Thus, for example, if the goal is to reduce the child's aggressive behavior, one might want to establish short-term objectives as well as long-term objectives. A short-term objective for an aggressive child might be to interact with peers in the classroom for one hour on five consecutive school days without physically attacking another child. The long-term objective might be for the child to interact for 3 hours with peers on 10 consecutive school days without attacking another child. In this way, one can judge by the attainment, or non-attainment, of the short-term objective whether some modification is needed in the intervention strategy, or long-term goals.

Such an approach mitigates the possibility of using a strategy for six months before discovering that no progress whatsoever has been made.

It is important to note that the objectives and goals refer to behaviors of the clients. They do not refer to activities of the social worker. Thus a goal of the program would not be to conduct 10 parent meetings throughout the year. Rather the goal might be for the mothers in the group to reduce their use of punishment with their youngsters. The question of how the worker's activities are monitored is an important one, but worker activities must not be confused with attainment of objectives. The monitoring of the program's implementation must be put into a separate category, that of process or effort evaluation. This type of assessment is critical even in effectiveness studies, for when objectives are not achieved, it is essential to know if the intervention did not work or if it was ever really tried. For example, if the social worker was unusually busy for much of the winter and did not have time to phone the parents to remind them of meetings, or to provide for transportation, one cannot assert that group discussion does not bring about behavior change. It must be known that the procedures were not carried out as planned. It would be a major error in the above case to eliminate group meetings from the project the following year because parents do not acquire new skills through group interaction.

On the other hand, if the process evaluation indicates that the intervention was carried out as planned but there was still no change in parental attitudes or behavior, one possible conclusion is that the strategy does not work. Unfortunately, hard work does not equal effectiveness; perhaps it should, but it does not.

An alternative explanation of the seeming failure is that the instruments or criteria selected to assess change were inappropriate. That introduces a topic which presents enormous difficulties for school social workers attempting to evaluate their own work, the problem of instrumentation.

There are at least seven modalities that can be employed to assess the attainment of objectives in school social work. These are: 1) questionnaires; 2) observation; 3) interviews; 4) rating scales; 5) tests; 6) self-reports, and 7) hard data, such as attendance records. Hard data, test scores, and observations tend to carry the most credibility with those determining the future of programs. Interviews, in general, are considered the most unreliable. Ratings and questionnaires fall in between the two. Thus, if at all possible, in assessing effectiveness, it is wise to include hard data, and/or test scores, and/or observations.

These seven modalities can be used to assess the three major criteria of effectiveness in social work: 1) improved attitudes and feelings of the targets of intervention; 2) improved views of significant others about these targets; and 3) indices of competent funtioning of the target individuals. All three criteria are legitimate ways to determine program effectiveness, although practitioners with different theoretical orientations would not give three equal weight. To the behaviorally-oriented worker, the only criterion of importance is that of competent functioning. Neither attitudes nor feelings would be accepted as evidence of effectiveness since they rarely can be assessed by observable behavior. To practitioners more oriented toward cognitive, systems, or psychodynamic perspectives, attitudes and feelings of target individuals and relevant others are of major importance as they are seen as predictors of future behaviors. Thus the theoretical orientation of the program and staff plays an important role in the selection of criteria by which program effectiveness will be measured, as well as modality employed. Other factors being equal, evidence of competent social functioning is likely to carry more weight with policy-makers and funding agencies than either improved views of others, or improved feelings of clients.

If one were to combine the list of instrument modalities and criteria in a single table, a detailed picture would emerge of alternative ways to evaluate preprimary programs for handicapped children, and most other school social work interventions as well. The chart labeled Table 1 presents this combination.

Examples of several instruments which are attached could be placed on the above chart. The Instrument for Determining Attitudes Toward the Pilot Projects assesses, among other things, the views of parents toward the child who participated in an intervention program for gifted children, and belongs in box 12. The questionnaire was not designed for parents of preschoolers, but it could be adapted for that purpose by including more items like number 3, 4, and 5, that is, this program increased my child's self-confidence; or this program had a positive influence on my child's attitude toward school. A more desirable formulation of these items would be to ask parents at the beginning and end of the program, to rate their agreement with statements such as "My child appears self-confident" or "My child has few friends." The parent would be asked to agree strongly or mildly or disagree strongly or mildly with each statement. This is known as a Likert-type, Forced Choice Scale (Jahoda, Deutsch, and Cook, 1951). The categories can be collapsed for ease of interpretation into a simple dichotomy, agree or disagree, so that one can say at the start of the program, 50% of the parents agreed with the first statement, and at the end, 85% agreed. Tests of significance of difference can then be computed for groups of respondents.

A similar Likert-scale is used in a shortened version of Parental Attitude Research Instrument (Radin and Glasser, 1965) also included in the handout. This questionnaire assesses maternal attitudes toward child-rearing and would fit into box 5. It would be appropriate for programs in which parents are the targets of intervention. The Stephens-Delys Locus of Control Test (Stephens and Delys, 1973) is a questionnaire which reveals children's feelings about their ability to control the rewards and punishments that are meted out to them. Thus it is

a questionnaire that assesses feelings and attitudes of clients, and belongs in box 5; it would be appropriate for use in programs where children are the intervention targets. The Interpersonal Perception Research Instrument (Borke, 1971) is a questionnaire which assesses the child's ability to empathize with others. It thus belongs in box 16 and is appropriate for programs focused on changes in children's abilities.

The Cognitive Home Environment Scale (Radin and Sonquist, 1968) and the Ypsilanti Parental Practices Questionnaire are both instruments attempting to obtain information about social functioning in the home and thus fall into box 19, The former is structured, relatively easy to score, and asks questions about specific events that occurred. The latter, which fits into box 19 less comfortably, is relatively open-ended and asks parents to offer a description of their typical behavior in situations which may, or may not, have occurred in exactly that fashion. Open-ended questionnaires such as this one are rather difficult to score, and even more difficult to score reliably; they should not be used without much forethought. One strategy of coping with the problem, if the questions are deemed important, is to administer the questions to a group of individuals like the project participants but not in the program and then analyze the responses to see if they fall into a limited number of categories. If they do, the open-ended questionnaire can be transformed into a multiple choice model in which the frequent categories are presented to the respondents who are asked to check the ones they prefer.

The Teacher Behavior Inventory-Early Education Version (Sarri and Radin, 1973), is an instrument asking teachers to rate specific behaviors of preschoolers in their class, and belongs in box 11 as it taps the views of significant others about intervention targets. The rating scale has been adapted for use by family daycare mothers and conceivably could also be adapted for use by parents or siblings. Since individual teachers use different anchors in making judgments, it is

important to look at change scores in the items rather than try to interpret the responses at a single point in time or compare responses of two teachers. If a single teacher completes this form for an entire class, some judgments can be made if post-intervention scores only are available; it is best used when both before and after forms have been completed by the same individual who is not told what the earlier ratings were when completing the post form.

The most interesting item in the packet is the Hess Toy Sorting Task (Hess, Shipman, Brophy, and Bear, 1968). This represents one of the newer trends in instrument development and combines observations with tests. It reflects an attempt to get away from anecdotal information, and obtain data about actual behavior under laboratory-like controlled conditions. The toy sorting task is similar to a more complicated version called the "Eight-Block Sort Task" (Hess and Shipman, 1965) which was part of the test battery used to evaluate the effectiveness of several models of preschool education in the Head Start Planned Variations Study (US Dept of HEW, 1971). In the Eight-Block Sort Task the parent is asked to teach the child how to group blocks on two dimensions simultaneously. The simpler version, the toy sort task, assesses the parent's ability to teach the child to group toys on two dimensions consecutively, first by type of toy and then by color. As the handout indicates, points are awarded for the child's performance, but more complicated scoring is required to score the mother's teaching techniques. This task belongs in box 17.

The more usual approach to observational data is to collect them as they occur naturally in the environment where conditions are not neatly controlled, that is, in the home, classroom or playground. Many books have been written on the topic and it is far too complex for this brief discussion, but some important components can be cited that are relevant to assessment of program effectiveness. Collecting observational data before, during, and after intervention in natural environments requires the presence of someone who is trained and has the time to chart the frequency with which specific behaviors occur or to record

the presence or absence of specific behaviors every few seconds. Typically, classroom teachers do not have time to engage in these activities. For widescale use of this procedure on many targets of interventions, additional staff members will be needed. Paraprofessionals, college students, and even high school seniors have been used in this capacity. When only a few clients are involved, professionals in schools, such as school social workers, may function as observers if their schedules permit. It is not easy to collect naturalistic observational data, but when they are available on a pre and post basis, they are extremely convincing. This approach would fall into box 17 on the chart.

One modification of observation in the natural environment which is economically feasible is the recording by clients themselves of what they do at specific times, such as when they put a child to bed. This technique obviously cannot be used with young childr , but it would be applicable to parents who are participating in programs. It does require motivation on the part of the target of intervention and a certain degree of literacy. Thus the utility of this approach maybe somewhat limited when working with par nts of high risk preschoolers. It is worth consideration, however, and can be simplified to be used with adults who have a limited education if charts are made which require only checkmarks in appropriate boxes when a behavior occurs. If used for self-monitoring by parents, the information would fall into box 21. If used by these same parents to record the behaviors of their children who are the targets of the intervention, the data would fall in box 17.

The age of the client has relevance for factors other than choice of modality in the assessment of program effectiveness. Age also affects the accessibility of the clients. Adults are often available to evaluators for very limited periods; however, when the target is a child who is in school for prolonged periods of time, the task of observing the youngster, or administering several types of instrument is not difficult. On the other hand, the young age is associated with a scarcity of reliable, valid measures that can be used. Head Start brought forth many more

instruments than there were in past years, but there is still a shortage. Hence, the importance of observational data with preschoolers. Educational Testing Service publishes brief descriptions of tests and measures have been developed for preschool children. (An example is attached.) These abstracts are grouped by topic. One topic is assessments of self-concept in preschoolers. Other topics include language development tests, tests for Spanish-speaking children, and measures of infant development. These annotated bibliographies are available free, or at a low price, and can be obtained by writing to Educational Testing Service, Princeton, N.J. 08540 and requesting the Head Start Test Collection Reports.

In general, it is preferable to use standardized instruments whose reliability and validity are fairly well established. If such instruments are not available, the next best alternative is to modify a standardized instrument to meet the particular needs of the program being evaluated. As a last alternative, the staff can design its own instruments. The latter requires considerable time and effort for the items must be widely pretested to be certain that they are clear, unbiased, assess only one attitude or skill at a time, measure what they are supposed to measure, and produce repeatable responses. If instrument development is undertaken, it is wise to seek the consultation of the school psychologist or someone from a nearby university to be certain that money and effort are not wasted on a scale that has serious flaws.

A full discussion of research design is beyond the scope of this paper, but it should be noted that even with pre and post scores on appropriate criteria with appropriate instruments, effectiveness is not clearly established unless it can be shown that maturation, fatigue, or unrelated contemporary events, such as the introduction of Sesame Street on TV, did not produce the results obtained. Behaviorists observe behavior before and after an intervention and then revert to the original conditions to show the problematic behaviors return, the ABA design. Nonbehaviorists must use other techniques; they have two major options: 1) the use of comparison control groups and 2) the use of the interrupted time series design.

The latter technique is particularly effective in programs that do not have access to populations that can serve as control or comparison groups. In this design, a series of measures is made before the program begins on the variables which the program hopes to influence (Epstein and Tripodi, 1977). These measurements serve as a baseline against which post measurements can be compared. A series of measurements is then made after the intervention ends to insure that changes obtained are stable overtime. By plotting the average scores over the several periods on a graph, with the vertical dimension reflecting the score, and the horizontal dimension the time, changes in behaviors can be detected. If the line is completely straight across all time periods, one can assume that the program did not achieve that objective. If the line ascends or descends toward the right, it appears that the program had some effect on the behavior targeted for change. Fortunately, there is a simple way to assess the significance of the change (Epstein and Tripodi, 1977). This technique can be used with any behavior or attitude or score that can be quantified.

The interrupted time series design is particularly useful to school social workers since some records are kept in school, such as attendance and test scores. If these are variables that the worker is attempting to change, the records can provide the pre-intervention data to be plotted. For those involved in preprimary programs, and for school social workers seeking to alter variables not recorded, such past information would not be available, but the techniques can still be used if the participants in an intervention program are known several months in advance. These future participants may be questioned or observed while waiting to enter the program; thus pre-intervention data will be available for this group, if not for those who were served immediately after their names were selected.

The use of control groups is ideal for eliminating the effects of maturation and contemporary history but is not realistic in school programs. Parents may well be antagonistic if asked to help evaluate programs others are enjoying. The ethics

of many school social workers would also negate the denying of service to anyone for the purpose of evaluating effectiveness. Maturation and contemporary history can be taken into account in another way, however, that is through the use of comparison groups which are offered a program under the same conditions as the intervention group but with some components changed. For example, if a preschool class is offered to a group of handicapped children, an alternate program can be offered to a second group selected on the same criteria, with assignment to either group made on a chance basis. The alternate program may consist of home tutorial visits to the child or a preschool class with an entirely different curriculum. The variation that is introduced should be one the staff feels has a reasonably good chance of succeeding so that families can be told in all honesty that they are being offered an equally good program but one that differs in some way from the original. By using the same assessment instruments in the intervention and comparison programs and contrasting the results, some tentative conclusions can be drawn about which element is responsible for the effects obtained. Such endeavors often provide surprising results. The staff may be certain that it is the curriculum or the contact with well-trained teachers, that produces changes in children. A comparison group which produces the same results with a different curriculum or an untrained staff can be a shock. In the long run, however, such information is invaluable for it may provide ideas about new types of programs that can be offered less expensively or more efficiently. For example, Levenstein (Madden, Levenstein, and Levenstein, 1976) started a toy demonstration program with trained social workers visiting the mothers. Substituting paraprofessionals produced the same results at a substantially lower cost.

Thus rather than offering the identical program to two groups, or offering nothing to control groups, planners of intervention programs should consider alternate programming. The important point is to assign participants to the two groups on a random basis, or if this is not possible, to make sure the two groups do not differ significantly on critical variables such as age, ethnicity, family size, etc.

The interrupted time series design can be combined with the use of a comparison group if a series of pre and post measures is collected on two groups. In this way, valuable information can be obtained about the relative power of the two approaches.

It is sometimes recommended that distal "natural" control groups be used to evaluate the effectiveness of intervention programs, that is, groups of similar individuals in other communities who did not have the opportunity to participate in the program. It is very risky to use such groups as controls. Communities differ in so many ways that attempting to attribute the lack of change in those residing elsewhere to the absence of the intervention is not tenable. The DARCEE Program in Tennessee attempted to do that (Gray and Klaus, 1970) and found that the participants in their preschool program made far greater gains than a control group of children living in a town several miles away. Fortunately, or unfortunately, the program also established a control group in the same town and found there were no significant differences between the children in the intervention group and the local control group at the termination of the program.

Local "natural" control groups are safer provided there are pre and post data available for all concerned. This rarely occurs; more typically the group is discovered after the start of the intervention program and the evaluators hope to capitalize on this by administering post measures to the new group when the instruments are given to participants in the intervention. Such a procedure can lead to fallacious conclusions for there is no control for motivation to participate. In one study (Wittes and Radin, 1971), it was found that mothers who refused to participate in group meetings, although their children attended pre school classes, were very different from mothers who attended alternate types of group programs, and also from those who were willing to attend but could not as there was no leader available to meet with them. All of the children showed significant intellectual gains after a year of preschool except children of parents who refused to attend. The mere absense of motivation to participate apparently is reflective of many

other parental characteristics which are critical for the development of their children. Thus, unless one randomly assigns individuals willing to participate to intervention and control groups, one cannot compare the groups after the program ends.

Process evaluation can be defined as the assessment of whether a program was implemented as it was designed to be implemented. One description of the evaluation of program effort, which is used here interchangably with process evaluation, refers to it as an assessment of the amounts and kinds of program activities considered necessary for the accomplishment of program goals (Tripodi, Fellin and Epstein, 1971). It refers not only to staff time and activity, but also to their use of material resources such as funds, space, and equipment. Essentially, process evaluation is a quantitative and qualitative description of the activity of the staff. As was said previously, this information says nothing about what was accomplished. However, if little effort is invested in a program, little is likely to be achieved (Tripodi, Fellin and Epstein, 1971). The first step in process evaluation, is delineating the procedures to be followed. This involves stating who will do what, when, where, and how frequently. Such description should refer not only to interactions involving staff and target individuals, but also to interactions among staff members themselves.

One of the simpler ways to engage in a process evaluation after the procedures are spelled out, is to establish a time line for each month on which the specific activities to be undertaken during the month are listed on a daily or weekly basis. This information can be recorded on a chart which contains four columns listed in the order in which they should appear from left to right: 1) Date; 2) Planned Activity (By whom, where, when); 3) Activity Conducted; 4) Quality Check. The first two columns, Date and Planned Activity, should be completed at the start of the month by the program director to collaboration with the relevant staff. The last two columns, Activity Conducted and Quality Check, should be completed by the staff members directly involved. The first column needs no explanation;

the second column should contain a brief statement about the activity, e.g., door-to-door canvassing to find possible participants, or group meeting for mothers in school led by the social worker. In the third column, a simple check for "carried out" can be made or an X for "not carried out" with relevant comments added, e.g., major topic of meeting and number of parents present. In the last column, Quality Check, a comment should be made about how the quality check was conducted, e.g., type of meeting made and given to the evaluator, or supervisor observed in-service training session. It is not assumed that there will be a quality check for every activity, but these checks should be conducted periodically perhaps bimonthly for each activity. The monthly time line would not only summarize activities to be conducted, indicate if they were conducted and if they were monitored, but would also be available to show school administrators who might question what has been going on in the past few months and what is planned for the next few weeks.

In addition to the time line chart, the staff should keep logs of their own activities. The instructional staff's logs might include lesson plans, the social workers' logs might have descriptions of parent meetings, the specialists' logs might record consultation activities, etc. As part of the quality check, sample logs should be examined periodically. The extent of the entire process evaluation would depend upon the funds and staff available. At the very minimum, the staff should see that records and tapes are available for future examination in spite of the fact that the quality checks may not be made as frequently as is desirable.

Thus far, nothing has been said about measuring the group dynamics that occur when clients are served in groups rather than individually, especially when the groups are composed of adults. It is clearly significant if a cohesive group develops, or if group norms are established and enforced by members. It is equally significant if the group does not become cohesive, if one autocratic leader dominates the discussions. An assessment of these dynamics does not fit into either effectiveness or effort evaluation. The development of a cohesive parent

group is neither the objective of the program nor a description of the worker's activities. Such events fall into a different category, one which some colleagues and I (Sundel, Radin, and Churchill, 1974) referred to as instrumental. We defined instrumental goals as those which are prerequisites for the attainment of short or long term goals, but which are not on the same behavioral dimension. Involvement in a cohesive parent group can be perceived as a condition of the client which facilitates the attainment of individual behavior change, but is quite different in nature than the terminal objective. Although group cohesiveness is not essential, it fosters goal attainment. In my view, such group conditions can logically also be labeled as instrumental activities or goals. Like worker effort, instrumental goals facilitate or are necessary for goal attainment, but are not the equivalent.

It is suggested that instrumental goals be considered separately from program goals, and that the attainment of the instrumental objectives be considered separately from the attainment of program objectives. The same guidelines that were offered for deriving program objectives from program goals apply here. If an instrumental goal is to create a cohesive group of mothers, the instrumental objective might be the attending of 75% of the meetings, by 75% of the members. Other group dynamics are more difficult to assess such as the nature of the leadership or the communication structure but some simple measures can be developed. One such example is observing the number of participants in the discussion at the first two and last two meetings to determine if there was an increase.

An important phenomenon that cannot be ignored in any discussion of effectiveness evaluation concerns unanticipated consequences. These are behaviors that develop following an intervention which the worker had not expected. The moral is to keep one's eyes and ears alert to events other than the stated objectives. Often these unanticipated consequences are of major importance and become the delineated objectives of the program the following year. For example, it has

frequently been observed that after low-income mothers in parent education programs gain a feeling of competence in handling children, the sentiment spreads to other areas and the mothers begin returning to school and applying for jobs. They also tend to seek divorces if their marriages are unhappy as they seem to feel they now can control their lives. Clearly unanticipated events can be of great significance in intervetnion programs and should not be overlooked because they were not included in the list of goals.

From the discussion of assessment of preprimary programs, it is evident that no one indiviudal can take credit or blame for what occurs; it is a team effort. However, school social workers can take comparable steps to assess the effectiveness of their own individual work. Long-term and short-term goals and objectives can be established using whichever criteria the worker feels are appropriate, the modality for assessing attainment of objectives can be specified, and the implementation of the procedures can be monitored. It is possible to delineate specific objective even in the most difficult situations, for example, consulation with teachers. The essential questions to ask one's self are "How will I know that my efforts have not been in vain? What are the signs that I should look for to indicate that I have been successful?" The answers to these questions form the backbone of the assessment of effectiveness for they lead to the specification of goals and objectives. The next tasks are to select ways to document what has been done through a time line chart, and what has been accomplished through the use of observations, rating scales, etc. The choice of a research design follows, that is, the decision to use an interrupted time series design, control or comparison cases, or an ABA design. Merely completing these tasks with one or two clients or client groups will mean that the school social worker has begun the process of assessing his or her effectiveness. If enough school social workers take those steps, a new direction in school social work may emerge, one that will permit a social work staff to say unequivocally, "Here is evidence

of what my colleagues and I have accomplished. This is what a school work program can achieve." Hopefully, some day the school social worker will also add, "Here are some ideas about how we can test the effectiveness of a new strategy I would like to try."

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TABLE I

TECHNIQUES OF ASSESSING
SCHOOL SOCIAL WORK PRACTICE
IN PREPRIMARY PROGRAMS

	Criteria of Effectiveness		
Modality	Improved Feelings and Attitudes of Clients	Improved Views of Significant Others About Clients	Indices of Competent Social Functioning
Hard Data (Objective report of events)	1 xxx	8 xxx	15 Attendance records; Drop out rates; Placement in special education classes; Placement out of special education classes; court actions.
Tests (Sets of Questions to which there are right and wrong answers)	2 xxxx	9 xxx	16 Standardized tests: Project or Teacher designed tests; (Of factors such as academic achievement, intelligence, creativity, social maturity, adaptive behavior, and knowledge in specific areas)
Observations (Recordings of behaviors that were seen)	3 Counts of smiles or crying as reflections of feelings	10 xxxxx	17 Systematic observations of behavior in the classroom, in the playground, at home, of parent-child interactions, of teacher-child interactions, of child-child interactions. Data collected before intervention, at end of intervention, periodically after intervention ended.
Rating Scales (Rankings of data on some dimension such as frequency)	4 Ratings completed by client re:own feelings attitudes periodically, as well as at beginning and of interventions	11 Teacher rating scales such as Pupil Behavior Inventory; parent rating of children's behaviors. Specific behaviors are rated as to frequency of occurrence.	18 Tape recordings of dyadic interactions or group discussions made before the intervention and after can be given to blind judges who evaluate these as to evidence of competence of participants.

Questionnaires (Instruments with questions that do not have right and wrong answers)	5 Structured and semi-structured to assess attitudes and feelings of clients pre and post intervention	12 Structured and semi-structured to assess views of parents and teachers about children, or of teachers' views of parental behaviors, pre and post intervention.	19 Factual information about adult's or child's behaviors collected through questionnaires before start of intervention, periodically during intervention, at end of intervention, and periodically afterward
Interviews (Open ended inquiries)	6 ftructured or open, conducted before intervention and afterward.evaluated by blind judge as to differences	13 Structured or open, conducted before intervention and afterward, evaluated be blind judge as to differences	20 xxxxx
Self-Reports (Descriptions by individuals of their own feelings and behaviors)	7 Diaries of feelings and attitudes kept at beginning of intervention and for some time afterward, evaluate by blind judge as to differences	14 xxx	21 Clients' records of their specific behaviors performed under specific circumstances which could be corroborated.

A

INSTRUMENT FOR DETERMINING
THE ATTITUDES TOWARD THE PILOT PROJECTS
OF PARENTS WHOSE CHILDREN ARE INVOLVED
IN THE SECTION 47 PROJECTS

Project Objective No. 2: 80% of the parents of students involved in the pilot projects for the gifted and talented will indicate positive attitudes towards the projects, as measured by an attitudinal survey prepared by the state program coordinator and administered toward the close of the school year.

Directions to the Parent: As you undoubtedly know, your child has been a member of a special program for talented students. This program has been funded, at least in part, by state funds (Section 47 of the State Aid Act). Twelve districts have received funds for these pilot programs.

We are anxious to determine the attitudes parents of the students have toward the programs. Therefore, we have prepared the following set of questions which are designed to survey parental attitudes. We hope you will take a few minutes to fill out this form and return it to the indicated address.

Fifteen questions are listed. In the spaces provided to the right of the questions, you are asked to indicate the following:

Strongly agree.....SA
Agree..... A
Neutral or Not Applicable...N/NA
Disagree..... D
Strongly Disagree.....SD

Indicate only one check (✓) for each question. Please respond to each item.

Space is provided for you to comment on each question, if you care to do so. Also, two additional questions are asked which require a written response. We would appreciate it if you would take the time to respond to these questions as well. You may use the back of the sheets if you need additional space.

Directions for project personnel: In order to achieve the objective, 80% of the parents completing this attitudinal survey must attain scores above zero, the point range being plus 30 to minus 30. The point values for each of the responses are as follows:

Strongly agree (SA).....+2
Agree (S).....+1
Neutral or Not Applicable
(N/NA)..... 0
Disagree (D).....-1
Strongly disagree (SD).....-2

NOTE: A parent version of this instrument, which will not include the "Directions for project personnel," the full name of the instrument, or the program objective, will be prepared for parent use.

	SA	A	N/NA	D	SD
1. This program meets the needs of my child.					
Comments:					
2. I feel that I understand what is taking place in the program.					
Comments:					
3. This program has had a positive influence on my child's attitude toward school.					
Comments:					
4. This program has increased my child's self-confidence.					
Comments:					
5. This program has enlarged my child's friendships.					
Comments:					
6. I do not feel that my child is missing the "basics" as a result of this program.					
Comments:					
7. I think this program should be continued.					
Comments:					
8. I think it is important to have my child work with children of similar academic ability.					
Comments:					
9. I am not concerned about my child being away from the regular classroom.					
Comments:					
10. I am pleased that this program lets students of similar academic interests and abilities work together.					
Comments:					
11. I am pleased that this program uses my child's current interests to develop in-depth academic activities.					
Comments:					

	SA	A	N/NA	D	SD
12. I am pleased that my child is able to develop new interests in this program.					
Comments:					
13. I am pleased that my child is exposed to areas of the curriculum in which he/she hasn't worked before.					
Comments:					
14. I am pleased that this program tries to develop greater enthusiasm in my child for academic pursuites.					
Comments:					
15. I am pleased that my child is able to bypass (avoid) repetitious and inappropriate requirements.					
Comments:					

A. What has been the most beneficial thing that has happened to your child as a result of participating in this program?

B. What suggestions would you have for improving the program?

INVENTORY OF ATTITUDES ON FAMILY LIFE AND CHILDREN

Parental Attitude Research Instrument
(Glasser-Radin Revision)

Read each of the statements below and circle the appropriate letter: "A" for "strongly agree," "a" for "mildly agree," "d" for "mildly disagree," and "D" for "strongly disagree."

A	a	d	D
strongly agree	mildly agree	mildly disagree	strongly disagree

There is no right or wrong answer, so encourage father to answer according to his own opinion. It is very important to study that all questions be answered. Many of the statements will seem alike, but all are necessary to show slight differences.

		Agree		Disagree	
84	A child who is "on the go" all the time will most likely be happy.	A	a	d	D
74	Children should be more considerate of their fathers since their fathers suffer so much for them.	A	a	d	D
9	Children will get on any man's nerves if he has to be with them all day.	A	a	d	D
87	Sex is one of the greatest problems to be contended with in all children.	A	a	d	D
4	Some children are just so bad they must be taught to fear adults for their own good.	A	a	d	D
62	Children pester you with all their little upsets if you aren't careful from the first.	A	a	d	D
21	Children would be happier and better behaved if parents would show an interest in their affairs.	A	a	d	D
56	Children should never learn things outside the home which make them doubt their parents ideas.	A	a	d	D
32	Fathers very often feel that they can't stand their children a moment longer.	A	a	d	D

		Agree		Disagree	
100	Children are actually happier under strict training.	A	a	d	D
45	The sooner a child learns to walk the better he's trained.	A	a	d	D
37	Parents must earn the respect of their children by the way they act.	A	a	d	D
8	A child will be grateful later on for strict training.	A	a	d	D
25	A father should do his best to avoid any disappointment for his child.	A	a	d	D
110	There is usually something wrong with a child who asks a lot of questions about sex.	A	a	d	D
71	Parents should know better than to allow their children to be exposed to difficult situations.	A	a	d	D
54	Children who are held to firm rules grow up to be the best adults.	A	a	d	D
95	A good father will find enough social life within the family.	A	a	d	D
13	One of the worst things about having children is a man feels that he can't get out.	A	a	d	D
97	Fathers sacrifice almost all of their own fun for their children.	A	a	d	D
70	A child's ideas should be seriously considered in making family decisions.	A	a	d	D
106	The trouble with giving attention to children's problems is they usually just make up a lot of stories to keep you interested.	A	a	d	D
58	There is no good excuse for a child hitting another child.	A	a	d	D
22	Most children are toilet trained by 15 months of age.	A	a	d	D

		Agree		Disagree	
67	Parents who are interested in hearing about their children's parties, dates, and fun help them grow up right.	A	a	d	D
77	Most children should have more discipline.	A	a	d	D
89	A father has a right to know everything going on in his child's life because his child is part of him.	A	a	d	D
36	Having children gives a man the feeling that his wings have been clipped.	A	a	d	D
113	When you do things together, children feel close to you and can talk easier.	A	a	d	D
109	Few women realize that a father needs some fun in life too.	A	a	d	D
79	The child should not question the thinking of his parents.	A	a	d	D
31	Strict discipline develops a fine character.	A	a	d	D
57	A child soon learns that there is no greater wisdom than that of his parents.	A	a	d	D
93	When a child is in trouble he ought to know he won't be punished for talking about it with his parents.	A	a	d	D
12	A child should be taught to avoid fighting no matter what happens.	A	a	d	D
20	A father should make it his business to know everything his children are thinking.	A	a	d	D
A	A child can probably get a good job if he's willing to work hard even though he does not graduate from high school.	A	a	d	D
B	Most fathers feel very comfrotable when they go up to school.	A	a	d	D
C	A busy father does not have the time to read to his children.	A	a	d	D
D		A	a	d	D
E	A busy father doesn't have time to find out what his children are learning in school.	A	a	d	D

THE UNIVERSITY OF MICHIGAN
School of Social Work

Stephens-Delys

Locus of Control Test

1. What makes you happy?

2. What makes other kids happy?

3. What makes mothers happy?

4. What makes fathers happy?

5. What makes teachers happy?

6. What makes you unhappy?

7. What makes other kinds unhappy?

8. What makes mothers unhappy?

9. What makes fathers unhappy?

10. What makes teachers unhappy?

THE UNIVERSITY OF MICHIGAN
School of Social Work

Stephens-Delys

Locus of Control Test

11. What makes you feel good?

12. What makes other kids like you?

13. What makes mothers love you?

14. What makes fathers love you?

15. What makes teachers like you?

16. What makes you angry?

17. What makes other kids angry?

18. What makes mothers angry?

19. What makes fathers angry?

20. What makes teachers angry?

THE UNIVERSITY OF MICHIGAN
School of Social Work

Interpersonal Perception Research

Part II

Name:_____ Date of Birth:_____

Date:_____

Age:_____ Examiner:_____

Here are some faces that show how a little girl might feel. How does this little girl feel? (Have child identify feelings represented by each picture. If she has any difficulty, identify the feeling for her).

Check pictures child named correctly: ____ None ____ Happy ____ Sad ____ Mad

1. Show me how another girl would feel if you shared a piece of your candy with her. Would she feel happy, sad, or mad? 1.H____ 2.S____ 3.M____

2. Show me how another girl would feel if you took her pail and shovel away from her. Would she feel happy, sad, or mad? 1.H____ 2.S____ 3.M____

3. Show me how another girl would feel if you spilled paint on her picture by mistake. Would she feel happy, sad, or mad? 1.H____ 2.S____ 3.M____

4. Show me how another girl would feel if she had just finished building a tower of blocks and you knocked it down for fun. Would she feel happy, sad, or mad? 1.H____ 2.S____ 3.M____

5. Show me how another girl would feel if she was getting on a tricycle and you pushed her off because you wanted to ride it. Would she feel happy, sad, or mad? 1.H____ 2.S____ 3.M____

6. Show me how another girl would feel if you tossed some sand in the air and it accidently got in her eyes. Would she feel happy, sad, or mad? 1.H____ 2.S____ 3.M____

7. Show me how another girl would feel if she wanted to play with you and you wouldn't let her. Would she feel happy, sad, or mad? 1.H____ 2.S____ 3.M____

8. Show me how another girl would feel if you invited her to come and play with you. Would she feel happy, sad, or mad? 1.H____ 2.S____ 3.M____

EARLY EDUCATION VERSION

TEACHER RATING FORM

Pupil Name_____ Teacher_____

Please write in for each item the letter(s) of the rating chosen for this pupil (see alternatives in box). It is not necessary to spend a great deal of time in assessing the pupil. Please answer all items, even if you are uncertain or have little information. If you cannot answer an item, please write in "don't know."

ALTERNATIVE RATINGS
VF- Very Frequently
F- Frequently
S- Sometimes
I- Infrequently
VI -Very Infrequently

21._____Show Initiative

22._____Uses materials in a variety of ways

13._____Blames others for trouble

14._____Resistant to teacher

45._____Seeks teacher's approval

16._____Attempts to manipulate adults

27._____Asks questions

88._____Appears depressed

29._____Explores objects in his environment

310._____Learning retained well

311._____Models teachers behavior

512._____Absences or truancies

313._____Shows flexibility

814._____Withdrawn and uncommunicative

315._____Completes assignments

316._____Trusts teacher

117._____Influences others toward troublemaking

518._____Appears hungry in school

519._____Inappropriate personal appearance

220._____Initiates interaction with teacher

421._____Seeks constant reassurance

322._____Takes time to reflect in making decisions

623._____Motivated toward academic performance

124._____Impulsive

525._____Appears in poor health

226._____Curious about environment

627._____Positive concern for own education

128._____Requires continuous supervision

129._____Aggressive toward peers

230._____Asks information of teacher

131._____Disobedient

732._____Steals

333._____Appears concerned about teacher's opinions

134._____Short attention span

135._____Easily led into trouble

836._____Hesitant to try, or gives up easily

137._____Disrupts classroom procedures

738._____Swears or uses obscene words

539._____Poor personal hygiene

440._____Possessive of teacher

141._____Teases or provokes students

842._____Isolated, few or no friends

343._____Shows positive leadership

144._____Resentful of criticism and discipline

COGNITIVE HOME ENVIRONMENT SCALE

Mother _____

Child _____

Interviewer _____

Date _____

Instructions for Interviewer:

a. Explain that you are conducting this study to find out more about how children learn. Since children spend far more time at home than at school, it is important to get a better idea of the things they do outside of school. All information which is collected will be kept confidential. Urge the respondent not to reply to any question she feels is too personal.

b. Use the child's name in each question where a blank is indicated.

c. When additional space is needed for recording the reply, use the reverse side of the paper indicating the number of the question and the sub-action being recorded.

d. In recording, be as specific as possible. Avoid generalities such as "occasionally," "most of the family," "not long ago," etc.

_____ 1. (When _____ starts school.) What grade do you expect _____ to receive in most subjects?

(Circle one) A B+ B C+ C D+ F

_____ 2. What grade would satisfy you?
(Circle one) A B+ B C+ C D+ F

_____ 3. a) What towns has _____ visited outside of Ypsilanti?

b) Why was one of the recent trips not connected with school taken?

c) Who went with him?

d) What did he do there?

_____ 4. a) What newspaper and/or magazines do you have in your home at present?

b) Who reads them?

c) Does _____ usually look at them?
Circle one.
Y N

d) If so, which ones?

_____ 5. What did you get _____ on (his) last birthday?

b) For Christmas?

c) What would you like to get (him) for (his) next birthday or Christmas?

_____ 6.

_____ 7. a) Does any member of your family have a library card? (Circle one) Y N

b) How often is the card used? Once a week --- once a month --- less often than once a month?

c) When was it used the last time?

_____ 8. Are any of these things available for _____ to use at home at present? (Check if yes)

a) _____ paste	g) _____ ruler
b) _____ paper	h) _____ crayons
c) _____ paints	i) _____ playdough
d) _____ coloring books	j) _____ scissors
e) _____ paper cut-outs	k) _____ pencils
f) _____ books	l) _____ other (specific)

_____ 9. Do you have a dictionary in your home? (Circle one) Y N

b) Who uses it?

c) How often? Once a week --- once a month --- less often than once a month? (Circle one)

_____ 10. Do you have an encyclopedia in your home? (Circle one) Y N

b) Who uses it?

c) How often? Once a week --- once a month --- less often than once a month? (Circle one)

_____ 11. Did you teach _____ to write (his) name? (Circle one) Y N

b) To count? (Circle one) Y N

c) To read? (Circle one) Y N

d) All together how much time do you (or your husband) spend trying to help _____ learn?

e) Do you play with _____? (Circle one) Y N

f) What do you play?

_____ 12. When does _____ usually eat dinner on weekdays?

b) Who eats with (him)? (Please list)

c) Who does most of the talking at the table?

d) About what?

_____ 13. a) At what times are you together as a family on weekdays?

b) What are some of the things you do together at these times?

_____ 14. a) (If husband is in household) What are some of the things your husband does with _____ on weekdays?

b) On weekends?

_____ 15. a) Is there any adult outside of you (and your husband) that _____ is particularly friendly with? (Circle one) Y N

b) How often does _____ see (him)?

c) What does (he) do when (he's) with them?

_____ 16. a) Do you read books to _____?
(Circle one) Y N

b) If yes, what kind?

c) How often do you read to (him)?

d) How long does (he) listen?

_____ 17. a) Do you suggest that _____ watch any particular programs? (Circle one) Y N

b) If yes, which ones?

_____ 18. a) Have you tried to teach _____ new words? (Circle one) Y N

b) Why?

c) If yes, when did you teach (him) a new word last?

d) What was the word?

_____ 19. a) Are you concerned about the way _____ talks? (Circle one) Y N

b) If yes, in what way?

c) Have you tried to get (him) to change? (Circle one) Y N

d) If so, how?

_____ 20. How much schooling would you like _____ to receive?

_____ 21. How much schooling do you expect _____ to receive?

_____ 22. What is the least amount of education you think _____ must have?

_____ 23. a) What kind of work do you think _____ will do when (he) grows up?

b) What kind of work would you not like (him) to do?

_____ 24. a) What are some of the things _____ does that you approve of?

b) Does (he) know that you approve of them? (Circle one) Y N

c) How do you show that you approve of them?

d) Did you praise or hug _____ in the last few days for something (he) did? (Circle one) Y N

e) If yes, what was it that (he) did?

_____ 25. a) Do you want _____ to go to college? (Circle one) Y N

b) If yes, how much do you think it will cost to send (him) to college? $_____ per year.

c) Have you made any plans for meeting this bill? (Circle one) Y N

d) If yes, what are some of these plans?

F

Ypsilanti Early Education
1968-1969
Ypsilanti Public Schools

Parents Practices Questionnaire

Parents Name_____ Child_____

Interviewer_____ Date_____

Here are some things all four year old children do. What would you do or say if...:

1. Your child scribbles something on paper, and you can't tell what he tried to draw or write. Then he says, "Momma, look." ... (What would you do or say?)

2. You have warned your four-year-old child to hold his glass of milk carefully so as not to spill it. Five minutes later, he drops it and makes a big mess. (What would you do or say?)

3. Your four-year-old child keeps jumping on the furniture. (What would you do or say?)

4. Your child had been playing alone for quite a while. Then he came over and said: "Mommy, come play with me." You tell him you are busy preparing dinner and cannot come. He left for a few minutes and then came back with the same request. (What would you do or say?)

5. The last time we had a big thunderstorm your child watched the lightening through the window and later he asked you what made it thunder and lightening. (What would you do or say?)

6. Your four-year-old child asked you why he should mind you. (What would you do or say?)

THE COGNITIVE ENVIRONMENTS OF URBAN PRE-SCHOOL CHILDREN

Robert D. Hess, Principal Investigator

MANUAL OF INSTRUCTIONS

FOR ADMINISTERING AND SCORING

TOY SORTING TASK

The measures described in this manual were developed in the project, Cognitive Environments of Urban Pre-School Children, supported by: Research Grant #R-34 from the Children's Bureau, Social Security Administration, and the Early Education Research Center, National Laboratory in Early Education, Office of Education, both of the U.S. Department of Health, Education, and Welfare; the Division of Research, Project Head Start, U.S. Office of Economic Opportunity; the Ford Foundation Fund for the Advancement of Learning; and grants-in-aid from the Social Science Research Committee of the division of Social Sciences, University of Chicago.

THE COGNITIVE ENVIRONMENTS OF URBAN PRE-SCHOOL CHILDREN

The research sample for the Cognitive Environment Study was composed of 163 pairs of Negro mothers and their four-year old children, from three socio-economic classes, defined by father's occupation and parents' education: upper-middle, professional and executive, with college education; upper-lower, skilled and blue collar, with high school education; lower-lower, semiskilled and unskilled, with no greater than tenth-grade education; a fourth group included father-absent families living on public assistance, otherwise identical to the lower-lower class group.

Subjects were interviewed in the home, and mothers and children were brought to the University of Chicago campus for testing, when the children were four years old. Follow-up data were obtained from both mother and child when the child was six years of age, and again at seven years.

Principal Investigator for the project is Professor Robert D. Hess, formerly Director, Urban Child Center, University of Chicago, now Lee Jacks Professor of Child Education, School of Education, Stanford University.

Co-Investigator for the follow-up study is Dr. Virginia C. Shipman, Research Associate (Associate Professor) and Lecturer, Committee on Human Development, and Director, Project Head Start Evaluation and Research Center, University of Chicago, who served as Project Director for the pre-school phase of the research.

Dr. Jere Edward Brophy, Research Associate (Assistant Professor), Committee on Human Development, University of Chicago, was Project Director for the follow-up study and participated as a member of the research staff of the pre-school study.

Dr. Roberta Meyer Bear, Research Associate (Assistant Professor). Committee on Human Development, University of Chicago, participated as a member of the research staff during the pre-school and follow-up phases of the project and was in charge of the manuscript preparation during the write-up phase of the research.

Other staff members who contributed substantively to the project include Dr. Ellis Olim (University of Massachusetts, Amherst), who was responsible for the major analysis of maternal language; Dr. David Jackson (Toronto, Ontario), who was involved in early stages of development of categories for the analysis of mother-child interaction, and participated in the processing and analysis of data; Mrs. Dorothy Runner, who acted as a liason with public agencies, and had primary responsibility for obtaining the sample of subjects; and Mrs. Susan Beal, computer programmer.

COGNITIVE ENVIRONMENT STUDY

TOY SORTING TASK MANUAL*

SUMMER 1967

Introduction

The toy sorting task was administered during the subjects' second visit to the university for testing and was the first of the three interaction tasks to be presented. It was relatively easier than the subsequent tasks and involved stimulus objects familiar to all the children. Consequently, it was useful not only for eliciting mother-child interaction but also for allowing the subjects to become acclimated to the deliberate teaching situation and, more particularly, to cognitive sorting tasks. Following the completion of the toy sorting task the more difficult block sorting task was administered.

Materials

Nine toys and partitioned board were used for this task. The board was a 9" by 18" brown slate divided into three equal sections by white line( ). The division of the board into three sections served to emphasize the distinctiveness of the three groups to be formed later. The toys used include three small chairs (dollhouse furniture), three plastic picnic spoons, and three plastic cars. The three types of objects were selected because they were assumed to be familiar to all the children. Among each type of toy (cars, chairs, spoons), one was red, one yellow, and one green. Thus the nine toys could be sorted into three groups in either of two ways: by color (red toys, green toys, yellow toys) or by object (cars, chairs, spoons).

*We wish to acknowledge the contribution of Mrs. Mildren Levine, who assumed primary responsibility for the design of this task as a research instrument.

COGNITIVE ENVIRONMENT STUDY

TOY SORTING TASK MANUAL

Procedure

The two sorting methods were taught to the mother while the child was out of the room. The specific instructions were as follows:

(Begin with the board empty, and the toys in random order off the board).

(1) HERE ARE SOME TOYS. THERE ARE DIFFERENT WAYS THEY CAN BE PUT TOGETHER ON THE BOARD.

(sort by object) THESE GO TOGETHER BECAUSE THEY'RE ALL... (pause). (Point to each group and elicit answer: spoons, chairs, trucks (cars).

(2) THE TOYS CAN BE PUT TOGETHER IN ANOTHER WAY, TOO. (take toys off board)

(sort by color; random placement within each section) THESE GO TOGETHER BECAUSE THEY'RE ALL...(pause). (point to each- red, yellow, green)

I'D LIKE YOU TO TEACH _____ WHAT I HAVE TAUGHT YOU: TO PUT THE TOYS TOGETHER IN THESE TWO WAYS. I'LL BE OUT IN THE HALL WHILE YOU TEACH HIM. AFTER YOU'RE SURE HE UNDERSTANDS HOW TO PUT THE TOYS TOGETHER IN THESE TWO WAYS, AND KNOWS WHY THE TOYS IN EACH GROUP BELONG TOGETHER, CALL ME BACK INTO THE ROOM. I'LL ASK HIM TO PUT THE TOYS ON THE BOARD IN THE TWO WAYS YOU HAVE TAUGHT HIM...AND TO DO IT WITHOUT ANY HELP FROM ME OR FROM YOU. TAKE AS MUCH TIME AS YOU NEED TO TEACH HIM. WHEN YOU'VE FINISHED, BE SURE TO CALL ME BACK INTO THE ROOM.

The tester then brought in the child and left the room. The mother was allowed complete freedom of time and method. When she finished and summoned the tester, the child was asked to repeat the sorts:

(after tester is called back into the room: take toys off board and randomize)

COGNITIVE ENVIRONMENT STUDY

TOY SORTING TASK MANUAL

(1) CAN YOU SHOW ME ONE OF THE WAYS TO PUT THE TOYS ON THE BOARD THAT YOUR MOTHER TAUGHT YOU?

(point to each group of toys; 3 in each sort)
THESE GO TOGETHER BECAUSE THEY'RE ALL...
(spoons, chairs, trucks(cars); red, yellow green)

(2) NOW CAN YOU SHOW ME THE OTHER WAY TO PUT THE TOYS ON THE BOARD THAT YOUR MOTHER TAUGHT YOU?

In general, the child was allowed three trials at sorting (i.e., two chances to get the second sort, since the children can usually remember one of them).

The child's performance on the post-task test was scored later.

Scoring

Points were awarded for post-teaching performance on the following basis:

Criterion		Score
1.	Sorts correctly into 3 groups by object (cars, chairs, spoons)	0 or 1
2.	Partially explains object sort (names one of two groups)	0 or 1
3.	Fully explains object sort (names all 3 groups)	0 or 1
4.	Sorts correctly into 3 groups by color (red, yellow, green)	0 or 1
5.	Partially explains color sort (names one or two groups)	0 or 1
6.	Fully explains color sort (names all 3 groups)	0 or 1

In combination these scores yield a range from 0 (neither sort correctly) formed) through 6 (both sorts correctly formed and fully explained). Subscores (sorting vs. verbalizing; object vs. color) may also be obtained. Points for verbalization were not awarded unless the child previously sorted correctly (exactly 3 groups, clearly differentiated). Points were credited whenever the child met criteria without help, including cases where the child corrected earlier errors on his second chance and also cases where the child first responded correctly but then became confused under continued questioning. Responses following probing by the tester were allowed to raise the child's score (when they involved passing an additional criterion) but not to lower it (since probing may have induced confusion or inhibition).

Probing by the tester was restricted to rephrasing of the questions and attempts to clarify the child's intent when it was unclear whether he had finished an intended sort or which toys were considered as members of a group and the total number of groups.

NOTE: For a description of the recording techniques, see "MOTHER-CHILD INTERACTION MANUAL OF RECORDING AND OBSERVATION TECHNIQUES."

HEAD START

TEST COLLECTION REPORT

SELF-CONCEPT MEASURES

An Annoted Bibliography

The Head Start Test Collection operates under a contract with the Department of Health, Education, and Welfare, Office of Child Development, Washington, D.C.20201. Contractors are encouraged to express freely their judgment in professional and technical matters. Points of view expressed herein do not necessarily, therefore, represent the opinions or policy of any agency of the United States Government.

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INTRODUCTION

This annotated bibliography is concerned with a variety of self-concept measures appropriate for use with children from the preschool level through the third grade. The instruments included were located through a search of dissertation abstracts, documents held by the ERIC Clearinghouse on Early Childhood Education, and the Head Start Test Collection at Educational Testing Service. It is anticipated that this report will be revised periodically as new instruments are developed and located.

The main section of this report is preceded by a table listing the instruments in alphabetical order and providing the page number on which each may be found. The entry for each measure starts with the author and test title, followed by the source from which it may be obtained. The annotation provides information concerning the purpose of the instrument, nature of the materials, groups for which it is intended, administration, scoring, interpretation, and standardization.

Since many of these instruments are of an experimental nature or are in the early stages of development, all the information desired was not always available. For example, a few instruments did not have any official title. At times, the copyright date was not provided, although it is probable that the author wished to protect his work from unauthorized publication. Sometimes the nature of the population for whom the instrument is intended was not quite clear. Often, information on reliability, validity, and norming was either missing or incomplete. In every case, however, the author of this report has attempted to provide as much of the essential data as possible.

This report is not intended to serve as the sole basis for selecting an appropriate instrument for a specific project. It provides a list of instruments purporting to measure self-concept, and gives a thumbnail description of each. As such, it can best serve to draw attention to measures which might otherwise be overlooked, and to assist the user as an initial screening device in his search for appropriate materials. However, after the field has been narrowed down to a few likely candidates, the user is urged to obtain copies of all materials associated with each one, and to examine these in detail before making his final selection.

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GRADE TABLE

This table shows the tests available and the grades for which they are considered suitable. Descriptions of the tests and supporting material will be found on the pages indicated.

	Preschool	Kindergarten	1st	2nd	3rd	Page
Animal Picture Q-Sort	X	X	X	X		10
Brown-IDS Self-Concept Referents Test	X	X				4
Children's Projective Pictures of Self-Concept	X	X				9
Children's Self-Concept Index			X	X	X	7
Children's Self-Social Constructs Test	X	X	X	X	X	8
Creelman Self-Conceptions Test			X	X	X	5
Faces Scale			X	X	X	7
Global and Specific Self-Concept Scale (Primary)			X	X	X	11
How I See Myself Scale					X	7
How Much Like Me?					X	4
Illinois Index of Self-Derogation-Form 3					X	9
Inferred Self-Concept Judgment Scale	X	X	X	X	X	9
Learner Self-Concept Test	X					9
Measurement of Self-Concept in Kindergarten Children		X				8
Perception Score Sheet		X	X	X		5
Pictorial Self-Concept Scale		X	X	X	X	4
Piers-Harris Children's Self-Concept Scale					X	10
Preschool Self-Concept Picture Test	X					11
Responsive Self-Concept Test			X			6
Riley Preschool Development Screening Inventory	X					10
Self-Concept and Motivation Inventory	X	X	X	X	X	6
Self-Concept as a Learner Scale-Elementary					X	6
Self-Concept Instrument-A Learner Scale					X	8
Self-Concept Interview		X				6
Self-Concept Sub-Scale of the Evaluation Scale	X	X				5
Thomas Self-Concept Values Test	X	X	X	X	X	11
When Do I Smile?			X	X	X	4

1. American Institutes for Research (AIR), How Much Like Me?

From: Dale W. Dysinger, American Institutes for Research, 135 North BEllefield Avenue, Pittsburgh, Pennsylvania 15213

Measures general self-concept in children in the third through the fifth grades. This is an untimed, self-administered assessment instrument which may be used in groups. The child is asked to read a concept and then rate, on a five-point scale, how much it is like him. No training is necessary to administer the test. Psychometric data on the test is not yet available.

2. American Institutes for Research (AIR),When Do I Smile?

From: Dale W. Dysinger, American Institutes for Research, 135 North Bellefield Avenue, Pittsburgh, Pennsylvania 15213

Measures self-concepts with regard to school, parents, and social activities. First to third and third to fifth grade forms are available. The test is examiner-group administered and paced for the first group; self-administered and untimed for the second. Examinees answer questions by checking a picture-type (faces varying in expression) graphic rating scale. The majority of the items are school related. The test-retest reliability was .42 for 100 cases tested after 4 months Internal consistency as estimated by the Spearman-Brown technique was .82 for 200 cases. Norms are provided for grades 1-3 (N=150), and grades 4-5 (N=100).

3. Bolea, A.S., Felker, D.W., & Barnes, M., Pictorial Self-Concept Scale

From: Angelo S. Bolea, Institute for Child Study, University of Maryland, College Park, Maryland 20740

Measures self-concept with regard to Jersild's categories, in children from the kindergarten through the fourth grade. The test is group-administered and is untimed. The test materials consist of a deck of cartoon pictures with a starred central figure. The child is asked to sort the cards into three pikes according to whether the starred figure is like him, sometimes like him, or not like him. Forms are available for boys or girls. Training is unnecessary to administer the test. Scoring is by hand or computer and is based on a weighted sum. PCS scores distinguish students with positive and negative self-concepts as judged by others. Fourth grade scores correlate .53 for girls, .31 for boys, and .42 for the total group (Ns=30, 33, and 63, respectively) with Piers and Harris Self-Concept Scale scores (see 22). The split-half reliability with 1,813 subjects was .85 corrected for length. Means by grade and sex are available.

4. Brown, B., Brown-IDS Self-Concept Referents Test

From: Institute for Developmental Studies, New York University, Washington Square, New York, New York 10003

Measures general self-concept in preschool and kindergarten children. The test is individually administered and untimed. Testing over two days is recommended for the younger child. A Polaroid picture is taken of the child and his is then asked questions about the picture. The different referents used are: the child as he sees himself, as he sees his mother seeing him, his teacher seeing him, and his peers

4. continued

seeing him. Experience is necessary to administer the test. After an interval of 3 weeks, test-retest reliability coefficients for 38 black and 36 white four-year-olds were .71 and .76 respectively, for the "Self as Subject" referent. Score differences between children of different socioeconomic strata have been noted.

5. Butler, A.L., Church, M., & Swayze, M., Self-Concept Sub-Scale of the Evaluation Scale (SCES)

From: Indiana University Bookstore, Bloomington, Indiana, $1.25 (C. 1965)

A subscale of the Evaluation Scale, this is a narrative-type descriptive rating scale designed to measure general self-concept in preschool and kindergarten children. The child is rated by judges (untimed). Six items assess self-awareness, feelings about self, progress toward self-sufficiency, task involvement, openness to new experiences, and ability to relate to others. Rating is on a five-point scale and some training is needed to be a judge or rater. Psychometric data was not available for review.

6. Combs, A.W., & Soper, D.W., Perception Score Sheet

From: Arthur W. Combs, University of Florida, Gainesville, Florida 32601

Designed to measure general self-concept in kindergarten and first-grade children. On the basis of unobtrusive observations, interviews, and projective tests, an observer infers a child's self-concept. The Perception Score Sheet has ten subscales: self generally, self as instrument, self with peers, self with adults, self with teachers, self and the school curriculum, perceptions of children, perceptions of adults, perceptions of teachers, and perceptions of school. Training for raters is necessary. Reliability of the perceptual inferences is assumed by the authors on the basis of communalities from factor analysis.

7. Creelman, M.B., Creelman Self-Conceptions Test (CSC)

From: Marjorie B.Creelman, College of Arts and Sciences, Cleveland State University, Cleveland, Ohio 44115 (C.1954)

Measures self-esteem and social or moral standards in children from preschool through the sixth grade. The test is available in three forms and may be administered individually or in groups. The instrument is paced, but untimed, and requires 2 to 2 1/2 hours to administer. The test materials consist of 24 plates, each containing 8 drawings. On three different occasions, the child is asked to choose drawings from a plate, using different criteria each time. Some experience is required to administer the test. Scoring is based on choice coincidence. A test manual is available. Psychometric data was not available for review.

11. continued

the child's perception of his cognitive skills and his ego capacity for handling these skills. The interview begins by showing the child a picture and encouraging him to talk about the picture. The structured part (about 20 questions) starts when he volunteers no more information. He is encouraged to volunteer more conversation after these questions are finished. Scoring is based on summing points from both the structured and unstructured portions of the interview. Training is needed to give the test. Correlations between test results and teacher judgments of the child's ego resources and school success of .45 and .02, respectively, have been noted.

12. Frymier, J., FAces Scale

From: Jack Frymier, School of Education, Ohio State University, Columbus, Ohio 43210

Assesses self-concept with regard to school, social relationships, physical development, home life, and situations, in children from the first through the third grade. The test is group administered and is paced. The child is asked to check the face, either a sad or happy one, which best expressed his feelings about a given situation. No training is necessary to administer the test. Psychometric data was not available.

13. Gordon, I.J., How I See Myself Scale

From: Ira J. Gordon, Director, Institute for Development of Natural Resources, College of Education, University of Florida, Gainesville, Florida 32601. Manual available from the Florida Educational Research and Development Council, College of Education, University of Florida, Gainesville, Florida 32601, for $1.00.

Designed to measure self-concept with regard to body, peers, teachers, school, and emotional control in children from the third through the sixth grade (elementary form). The test is self-administered and untimed. The test assumes that self-concept is not a unitary trait, but has a factor structure. Test items require the child to respond to bipolar statements on a scale from 1 to 5. No training is necessary to administer the test. Test-retest reliability for 34 third graders was .78 for the total score. Norms are provided for grades 3-12 by sex, race, and social class.

14. Helms, D., Holthouse, N., Granger, R.L., Cicirelli, V.G., & Cooper, W.H., Children's Self-Concept Index (CSCI)

From: Westinghouse Learning Corporation, 100 Park Avenue, New York, New York (C. 1968).

Modeled after Meyerowitz's test (see 20), this instrument measures peer acceptance at home and in school in children from first through the third grade. The test is group administered and untimed. CSCI consists of 26 pairs of stick figures with corresponding pairs of statements (one favorable and the other unfavorable). For each item, the child selects the figure (and statement) most like himself. Training is unnecessary to administer the test. Internal consistency coefficient was .80, computed on a sample of 100 second-grade pupils. Test-retest reliability obtained after a 2-week period was .66. Rank

8. Farrah, G.A., Milchus, N.J., & Reitz, W., Self-Concept and Motivation Inventory (What Face Would You Wear?)

From: Person-O-Metrics, 20504 Williamsburg Road, Dearborn Heights, Michigan 48127

Measures self-concept with regard to school (role expectation, achievement needs, failure avoidance, and self-adequacy). Preschool/Kindergarten, Early Elementary (1-3), Later Elementary (3-6) and High School forms are available. The test is examiner-administered to groups and is paced (25-30 minutes). On the Preschool/Kindergarten and Early Elementary forms the child responds to questions by marking on faces (happy, sad, etc.) with a crayon. No training is needed to give the test. Reliability for Preschool/Kindergarten, Early Elementary, and Later Elementary forms was calculated at .79, .77, and .83 respectively. Grade-level quartile norms are provided (N=300-500). A test manual and machine-scorable response sheets are available.

9. Fisher, J.K., Self-Concept as a Learner Scale--Elementary (SCAL-E)

From: John K. Fisher, Department of Psychology, Edinboro State College, Edinboro, Pennsylvania 16412

Designed to measure self-concept, with regard to learning in students from the third through the sixth grades. SCAL-E purports to assess motivation, task orientation, problem solving ability, and class membership. The test is examiner- or self-administered to groups and is untimed. The child is asked to determine whether statements are descriptive of him. Psychometric data was not available for review.

10. FitzGibbon, A., Responsive Self-Concept Test

From: Ann FitzGibbon, Far West Laboratory For Educational Research And Development. 1 Garden Circle, Hotel Claremont, Berkeley, California 94705

Measures in first and second grade children, nine psycho-social factors: self-awareness, emotional affect, relationship with family, relationship with peers, verbal participation, approach to learning, reaction to success/failure, self-satisfaction, and level of aspiration. The test is administered to small groups and is paced. Eight test forms are available: male and female forms for whites, blacks, Orientals, and Mexicans or Spanish Americans. A picture of the child is needed and he is asked to judge whether the examiner is talking about him, about someone he knows, or someone he does not know. Experience is necessary to administer the test. Psychometric data on the test is not yet available. A teacher's rating scale assessing the nine factors is available.

11. FitzGibbon, A., & Nimnicht, G., Self-Concept Interview

From: Ann FitzGibbon, Far West Laboratory for Educational Research and Development, 1 Garden Circle, Hotel Claremont, Berkeley, California 94705

Measures self-concept with regard to school and peers in school in 5- and 6-year-olds (kindergarten). Individually administered and untimed, the instrument is a partially-structured interview and seeks to assess

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order correlations of scores with teacher ratings of the child's self-concept for 4 different classrooms were .41, .60, .20, and .40. Standardization data from a sample of 1,900 disadvantaged children in the first, second, and third grades from 9 geographic areas is available.

15. Levin L.Y., & Lafferty, J.C., The Measurement of Self-Concept in Kindergarten Children

From: Research Concepts, 36176 Parkdale, Livonia,Michigan 48150 (C. 1967)

Measures general self-concept and non-self-concept in kindergarten children. The test is an untimed, examiner-administered group measure. There are sixteen separate administrations, each approximately one week apart, at which the children are asked to draw a picture spontaneously, based on eight non-self and eight self-concept topics. Some of the pictures are drawn after the children have listened to a story, looked at a cartoon, or seen a movie; others are not. Suggestions for the stories, cartoons, and movies which act as stimuli are provided. Crayons and construction paper are needed to take the test. Experience is needed to administer the test. A test manual which includes some frequency distributions, information on validity studies done to date, and a discussion on reliability is available.

16. Liddle,G.P., Self-Concept Instrument--A Learner Scale

From: Gordon Liddle, West Education Annex, University of Maryland, College Park, Maryland 20740

Designed to measure self-concept with regard to learning in children from the third through the sixth grades. The test is examiner- or self-administered to a group and is untimed. The students are asked to judge whether 36 statements are or are not true of them. No training is needed to give the test. Nineteen students, given the test twice at an interval of three weeks, marked 79.5 percent of the items in the same fashion. Although reliability estimates are based on small samples, the test discriminates between students nominated as having high and low self-concepts.

17. Long, B.H., Henderson, E.H. & Ziller, R.C., Children's Self-Social Constructs Tests (CSSCT)

From: Edmund H. Henderson, The Reading Study Center, College of Education, University of Delaware, Newark, Delaware 19711 (C. 1967)

Measures social self-concept. Preschool, primary, and adolescent forms are available. The preschool form of this attitude test is individually administered and untimed (approximately 10 minutes). The primary form is group administered and paced (20-45 minutes). Each form is designed to measure self-esteem, social interest, identification, minority identification, realism to size, and preference for others, while the primary form adds complexity as well. Test items consist of arrays of circles and other figures. A child is required to select a circle, draw a circle, or paste in a gummed circle to represent himself or some other person among those presented. Certain aspects of the child's conceptions of himself are inferred from an analysis of the arrangements. Experience is required to give the

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17. continued

test. A manual, presenting a wealth of psychometric data, is available.

18. McDaniel, E.L., Inferred Self-Concept Judgment Scale

From: ERIC Document Reproduction Service, P.O Drawer O, Bethesda, Maryland 20014. EDRS Price: $0.65 (microfiche), $6.58 (hard copy). Order ED 019 124.

An untimed measure of self-concept (as inferred) in children from preschool through the third grade. The test items are Likerty-type scales where raters are asked to judge the student's view of himself. Experienced raters are necessary. No psychometric data has been provided.

19. McNamara, J.R., Poterfield, C.L., Miller, L.E. & Arnold, H.S., Children's Projective Pictures of Self-Concept (CPPSC)

From: Charles L. Poterfield Head Start Program, Dade County Public Schools, Lindsey Hopkins Building, 1410 N.E. 2nd Avenue, Miami, Florida 33132

Measures general development of self-concept in preschool and kindergarten children. The test is individually administered and untimed. Test materials consist of ten plates depicting children interacting with adults or peers. In some cases the tester describes the action of the children in the picture to the subject, and in others the subject is simply presented with the picture. In each instance, the subject is to state which child in the picture is acting as he would. Male and female forms of the test are available. Some experience is required to administer the test. A test-retest reliability (Pearson) of .61 was obtained on 28 six-year-olds after 2 days. A Pearson product-moment correlation of .45 (N=38) was obtained with a modified version of the Illinois Index of Self-Derogation (see 20).

20. Meyerowitz, J.H., Illinois Index of Self-Derogation--Form 3

From: Joseph H. Meyerowitz, Baylor College of Medicine, Texas Medical Center, Houston, Texas 77025

Measures self-esteem in first- and second-grade children. The test is untimed, examiner-administered to small groups. In each item, one of a pair of stick figures is described in socially desirable terms, the other in undesirable terms, and the child is asked to pick the figure most like himself. Some experience is required to administer the test. Psychometric data is not readily available; however, see 19 above. The Children's Self-Concept Index (see 14) is modeled on this instrument.

21. New York State Education Department, Learner Self-Concept Test (L-SC)

From: Louis T. DiLorenzo, University of the State of New York. The State Education Department, Office of Research and Evaluation, Albany, New York.

21. continued

Measures self-concept as a learner in regard to teachers, peers, and classroom materials in preschool children. The test is individually administered and is untimed. Test materials consist of drawings depicting classroom situations. Test items ask the child which child in the situation is most like him. Four forms of the test for white male nonwhite males, white females, and nonwhite females are available. Some experience is required to give the test. L-SC scores have been found to have low, but significant rank order correlations of .20 (N=294) and .9 (N=297) with teacher ratings of self-concept. No reliability data is available.

22. Piers, E.V., & Harris, D.B., Piers-Harris Children's Self-Concept Scale (The Way I Feel About Myself)

From: Counselor Recordings and Tests, Box 6186 Acklen Station, Nashville, Tennessee 37212 (C.1969)

Measures self-concept with regard to behavior, intellectual and school status, physical appearance and attributes, anxiety, popularity, and happiness and satisfaction in students from the third through the twelfth grades. The test is examiner-administered to groups and paced (15-20 minutes) for grades 3-6. For older students it is self-administered and untimed. The child responds yes/no as to whether statements are generally true of him. The test yields scores for each of the six factors above. No training is necessary to give the test. A correlation of .68 was obtained when scores on P-HCSCS were compared with those on the Lipsitt's Children's Self-Concept Scale. (The latter test is intended for Grades 4-6). Validity has also been demonstrated by correlations with test number 3. Test-retest reliability of .72 was obtained for 56 third graders after 4 months. Kuder-Richardson formula estimated internal consistency of .90 for 56 girls and .93 for 63 girls in Grade 3.

23. Riley, C.M.D., Riley Preschool Developmental Screening Inventory

From: Western Psychological Services, 12031 Wilshire Blvd., Los Angeles, California 90025 (C. 1969)

Measures general self-concept in preschool children. The test is administered individually or in small groups and is untimed. The test is basically a variation of the Draw-A-Man Test but scored for self-concept. Training is necessary to administer the test. A test manual is available, but no psychometric data is provided.

24. Riley, J.E., Animal Picture Q-Sort

From: Calvin Janssen, College of Education, Texas Woman's University, Denton, Texas 76204

Measures adequacy in sex role in children from preschool through the third grade. The test is individually administered and untimed. The child is required to sort 36 animal pictures into a seven-category norm distribution ranging from "Like me" to "Unlike me." Administering the test requires some experience. Psychometric data was not available for review.

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25. Stillwell, L., Global and Specific Self-Concept Scale (Primary)

From: Lois Stillwell, Office of Child Study and Guidance, Akron Public Schools, 70 North Broadway, Akron, Ohio 44308

Measures general self-concept and self-role in children from the first through the third grades. The test may be examiner- or self-administered in a group and is paced. The test items are semantic differentials with points along the continuum verbally rather than numerically described. No training is necessary to give the test. Scoring is based on comparison. Psychometric data from the primary form is not yet available. (A form suitable for use with secondary school students is also available).

26. Thomas, W.L., The Thomas Self-Concept Values Test

From: Educational Service Company, P.O. Box 1882, Grand Rapids, Michigan 49501; or Walter L. Thomas, CO/MES, Inc., 2510 Deurpster St., Suite 118-119, Des Plaines, Illinois 60016 (C. 1967, 1969)

Designed to measure self-values in children from prekindergarten through the fourth grade. The test is individually administered and is untimed (approximately 15 minutes). Splitting the test into two sessions is recommended for prekindergarten and kindergarten children. The measure employs bipolar adjectives to evaluate fourteen theoretical factors such as happiness, sharing, male acceptance, fear of things, etc., by having the child assume the perspective of his mother, his teacher, his peers, and himself. A picture of the child is taken and utilized in the test. Scoring provides 14 value scores and 5 self-concept scores (four referent scores--self, mother, teacher, and peer--and a total). Experience is required to administer the test. Test-retest reliabilities, obtained on 34 Head Start children after an interval of 9 to 14 days, ranged from .34 to .93 for the nineteen scores; the median coefficient was .75. Internal consistency reliabilities were obtained from pairs of the five self-concept scales and ranged from .60 to .77; average correlation was .73.

27. Woolner, R.B., Preschool Self-Concept Picture Test

From: RKA Publishing Co., 3551 Aurora Circle, Memphis, Tennessee 38111 (C. 1966)

Measures general and ideal self-concepts in preschool children. The test is individually administered and untimed (approximately 15 minutes). The testing materials consist of ten plates with paired pictures on characteristics which preschool children commonly attribute to themselves; e.g., clean-dirty, strong-weak, sharing-not sharing, etc. The examinees are asked to identify which person in each plate they are, and which they would like to be. Scoring produces a discrepancy score between self and ideal self; i.e., dissatisfaction with self. Some experience is necessary to give the test. Four forms are available; Negro boys, Negro girls, Caucasian boys, and Caucasian girls. Test-retest reliability coefficients were obtained over 3 testing periods for the self and ideal self measures; the smallest coefficients were .94 and .80 respectively. Content validity was determined by asking children to describe the pictures; their descriptions agreed with the intended representations. Item response frequencies are available.